Continuing Medical Education Exam: December 2016

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Instructions:

The GIE: *Gastroinintestinal Endoscopy* CME Activity can now be completed entirely online. To complete do the following:

1. Read the CME articles in this issue carefully and complete the activity:

Sung JJY, Tang RSY, Ching JYL, et al. Use of capsule endoscopy in the emergency department as a triage of patients with GI bleeding. Gastrointest Endosc 2016;84:907-13.
Dietrich CF, Sahai AV, D'Onofrio M, et al. Differential diagnosis of small solid pancreatic lesions. Gastrointest Endosc 2016;84:933-40.
Niikura R, Yasunaga H, Yamada A, et al. Factors predicting adverse events associated with therapeutic colonoscopy for colorectal neoplasia: a retrospective nationwide study in Japan. Gastrointest Endosc 2016;84:971-82.
Childers RE, Laird A, Newman L, et al. The role of a nurse telephone call to prevent no-shows in endoscopy. Gastrointest Endosc 2016;84:1010-7.

2. Log in online to complete a single examination with multiple choice questions followed by a brief post-test evaluation. Visit the Journal's Web site at www.asge.org (members) or www.giejournal.org (nonmembers).
3. Persons scoring greater than or equal to 75% pass the examination and can print a CME certificate. Persons scoring less than 75% cannot print a CME certificate; however, they can retake the exam. Exams can be saved to be accessed at a later date.

You may create a free personal account to save and return to your work in progress, as well as save and track your completed activities so that you may print a certificate at any time. The complete articles, detailed instructions for completion, as well as past Journal CME activities can also be found at this site.

Target Audience

This activity is designed for physicians who are involved with providing patient care and who wish to advance their current knowledge of clinical medicine.

Learning Objectives

Upon completion of this educational activity, participants will be able to:

1. Explain the utility of capsule endoscopy in the triage of patients presenting with upper gastrointestinal bleed.
2. Differentiate pancreatic lesion diagnoses
3. Recognize factors predicting adverse events associated with therapeutic colonoscopy.
4. Define the impact of nurse telephone calls on the rate of no-shows for endoscopy.

Continuing Medical Education

The American Society for Gastrointestinal Endoscopy (ASGE) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.
The ASGE designates this Journal-based CME activity for a maximum of 1.0 *AMA PRA Category 1 Credit*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.
Activity Start Date: December 1, 2016
Activity Expiration Date: December 31, 2018

Disclosures

Disclosure information for authors of the articles can be found with the article in the abstract section. All disclosure information for GIE editors can be found online at http://www.giejournal.org/content/conflictofinterest. CME editors, and their disclosures, are as follows:

Prasad G. Iyer, MD (Associate Editor for Journal CME)
Consulting/Advisory/Speaking: Olympus; Research Support: Takeda Pharma
Amit Rastogi, MD (Associate Editor for Journal CME)
Consulting/Advisory/Speaking: Olympus
James Buxbaum (CME Editor):
Disclosed no relevant financial relationships.
Karthik Ravi, MD (CME Editor):
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William Ross, MD (CME Editor):
Consulting/Advisory/Speaking: Boston Scientific, Olympus
Brian Weston, MD (CME Editor):
Disclosed no relevant financial relationships.

Minimum Online System Requirements:
486 Pentium 1 level computer (PC or Macintosh)
Windows 95,98,2000, NT or Mac OS Netscape 4. × or Microsoft Internet Explorer 4. × and above 16 MB RAM 56.6K modem

Continuing Medical Education Questions: December 2016

QUESTION 1 OBJECTIVE:

Explain the utility of capsule endoscopy in the triage of patients presenting with upper gastrointestinal bleed.

The use of capsule endoscopy in emergency department as a triage of patients with GI bleeding

Question 1:

A 52-year-old male presents to the emergency department with coffee ground emesis. He is otherwise healthy and is on no medications except for occasional NSAIDs. On physical examination he appears comfortable with a blood pressure of 120/70 and heart rate of 70 beats per minute. In the triage of this patient, which of the following is true?

Possible answers: (A-D)

A. The majority of patients triaged with capsule endoscopy will not require hospitalization.
B. Adverse events will occur in approximately 20% of patients who undergo capsule endoscopy.
C. Approximately 50% of patients dismissed from the emergency department based on capsule endoscopy will eventually require hospitalization.
D. Approximately 25% of patients dismissed from the emergency department based on capsule endoscopy will ultimately have a high-risk lesion on EGD.

Look-up: Sung JJY, Tang RSY, Ching JYL, et al. Use of capsule endoscopy in the emergency department as a triage of patients with GI bleeding. Gastrointest Endosc 2016;84:907-13.

QUESTION 2 OBJECTIVE:

Differentiate pancreatic lesion diagnoses

Differential diagnosis of pancreatic lesions

Question 2:

A 62-year-old male is in your office to discuss a 12-mm pancreatic head solid mass noted incidentally on CT. The patient has been told that he probably has pancreatic cancer. Based on the study by Dietrich et al in this month's journal, you can tell the patient the following:

Possible answers: (A-D)

A. His suspicion is likely correct.
B. Contrast enhanced endoscopic ultrasound (EUS) can confidently make the diagnosis.
C. Based on its size alone the lesion is more likely to be a neuroendocrine tumor than pancreatic cancer.
D. Preoperative evaluation to define lesion is not necessary; surgical resection is needed.

Look-up: Dietrich CF, Sahai AV, D'Onofrio M, et al. Differential diagnosis of small solid pancreatic lesions. Gastrointest Endosc 2016;84:933-40.